

Statement of Contributions Received

Prescribed by Secretary of State 03/05

Name of Committee in Full Fred Deskins, Jr Republican Ward Council Seat Committee							
Full Name of Contributor James C. Pace - Foursome						Registration Number, if PAC	
Street Address 731 Iron Clad DR			Employer/Occupation/Labor Organization 300.00 check 20.00 cash			Form (Cash, Check, etc.) 1284	
City Columbus			State Oh		Zip Code 43213		Amount 320.00
Full Name of Contributor RICHARD HARRIS - Foursome						Registration Number, if PAC	
Street Address 1100 Beddington CT			Employer/Occupation/Labor Organization 225.00 check 95.00 cash			Form (Cash, Check, etc.)	
City Reynoldsburg			State Oh		Zip Code 43066		Amount 320.00
Full Name of Contributor William Riat - DONATION						Registration Number, if PAC	
Street Address 19 Sessions DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 196	
City Bexley			State Oh		Zip Code 43209		Amount 100.00
Full Name of Contributor NANCY FRAZIER - hole SPONSOR						Registration Number, if PAC	
Street Address 1811 Sawgrass DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 1948	
City Reynoldsburg			State Oh		Zip Code 43066		Amount 100.00
Full Name of Contributor PAUL ADAMS - DONATION						Registration Number, if PAC	
Street Address 460 Hunt Valley DR			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 6388	
City Reynoldsburg			State Oh		Zip Code 43068		Amount 75.00
Full Name of Contributor Tiberi For Congress - DONATION						Registration Number, if PAC	
Street Address 2021 E Dublin Granville Rd Suite 200			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 2962	
City Columbus			State Oh		Zip Code 43229		Amount 100.00
Full Name of Contributor John HARGROVE - DONATION						Registration Number, if PAC	
Street Address 13111 Summerfield Way			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 7472	
City Pickerington			State Oh		Zip Code 43147		Amount 50.00
Full Name of Contributor Fred Henderson						Registration Number, if PAC	
Street Address 940 S. Broadleigh Rd			Employer/Occupation/Labor Organization			Form (Cash, Check, etc.) 1860	
City Columbus			State Oh		Zip Code 43209		Amount 100.00

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]